

## PERSONNEL ACTIVITY REPORT

Employee Name: \_\_\_\_\_

Month/Year: \_\_\_\_\_

### TO BE COMPLETED BY EMPLOYEE

**INSTRUCTIONS:** This form is for employees who spend part of their day working on the Food Program. Each month, indicate the number of hours per day spent on administrative and program labor activities related to the Child and Adult Care Food Program. Examples of CACFP administrative activities include, but are not limited to: monitoring, record keeping, compiling data and completing the Claim for Reimbursement. Examples of CACFP program labor activities include, but are not limited to: menu planning, grocery shopping, cooking and serving meals and clean up after meals. This form will be used in documenting a nonprofit food service operation.

Date	Hours Worked on CACFP		Non CACFP Hours Worked	Total Hours Worked	Date	Hours Worked On CACFP		Non CACFP Hours Worked	Total Hours Worked
	Admin	Program Labor				Admin	Program Labor		
1					17				
2					18				
3					19				
4					20				
5					21				
6					22				
7					23				
8					24				
9					25				
10					26				
11					27				
12					28				
13					29				
14					30				
15					31				
16					TOTAL				

I certify that this is an accurate record of the number of hours worked on the Child and Adult Care Food Program.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

Employee Name: \_\_\_\_\_ Month/Year \_\_\_\_\_

**TO BE COMPLETED BY CENTER DIRECTOR/AUTHORIZED REPRESENTATIVE**

**A. (HOURLY PAID STAFF)**

Total administrative hours worked on CACFP \_\_\_\_\_ x \_\_\_\_\_ (hourly wage) =  
\$ \_\_\_\_\_ (Total administrative CACFP salary)

Total program labor hours worked on CACFP \_\_\_\_\_ x \_\_\_\_\_ (hourly wage) =  
\$ \_\_\_\_\_ (Total program labor CACFP salary)

**B. (SALARIED STAFF)**

Total administrative hours worked on CACFP \_\_\_\_\_ ÷ Total hours worked \_\_\_\_\_ = \_\_\_\_\_ %  
Total Salary for month \$ \_\_\_\_\_ x \_\_\_\_\_ % = \$ \_\_\_\_\_ (Total admin. CACFP salary)

Total program labor hours worked on CACFP \_\_\_\_\_ ÷ Total hours worked \_\_\_\_\_ = \_\_\_\_\_ %  
Total Salary for month \$ \_\_\_\_\_ x \_\_\_\_\_ % = \$ \_\_\_\_\_ (Total program labor CACFP salary)

I certify that payroll records are on file that verifies the total wages as listed above.

Signature of Center Director/Authorized Representative \_\_\_\_\_ Date \_\_\_\_\_